



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2023

Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

FEB 17 2023

343602

1. Entity ID Number 000054786		2. Exact name of the Corporation New England Roofing and Home Improvements Inc												
3. Principal Office Address 6 Gold Mine Road			City Chepachet	State RI	Zip 02814									
4. NAICS Code 212321		6. Brief description of the character of business conducted in Rhode Island Roofing and Exterior Improvements												
5. State of Incorporation Rhode Island														
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
President Name William F Cahill			Vice-President Name William F Cahill IV											
Street Address 6 Gold Mine Road			Street Address 21 Glenna Drive											
City Chepachet	State RI	Zip 02814	City Smithfield	State RI	Zip 02917									
Secretary Name William F Cahill			Treasurer Name William F Cahill											
Street Address 6 Gold Mine Road			Street Address 6 Gold Mine Road											
City Chepachet	State RI	Zip 02814	City Chepachet	State RI	Zip 02814									
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>														
Director Name William F Cahill			Director Name											
Street Address 6 Gold Mine Road			Street Address											
City Chepachet	State RI	Zip 02814	City	State	Zip									
Director Name			Director Name											
Street Address			Street Address											
City	State	Zip	City	State	Zip									
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>											
This information is currently of record in the Department of State. Changes require an additional filing.			<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SERIES</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>200</td> <td>STK</td> <td>100</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	200	STK	100			
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200	STK	100												
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee. Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.														
Name of Authorized Representative William F. Cahill					Date 2.14.23									
Signature of Authorized Representative William F. Cahill														

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov